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FACSIMILE TRANSMISSION

Total # of Pages 15 (including this page)

TO:	PHONE #:	FAX #:
Robert Landsman-Examiner Art Unit: 1647 USPTO		1-703-872-9306

From : David P. Lentini
Email Address : dlentini@foley.com
Sender's Direct Dial : 415.438.6454
Date : October 29, 2004
Client/Matter No : 072827-1801
User ID No : 4113

MESSAGE:

Dear Mr. Landsman:

Please see attached Petition For Extension Of Time and Amendment and Reply Under 37 CFR 1.111.

If there are any problems with this transmission or if you have not received all of the pages, please call 1-850-739-0139.

Operator:
Kristen Cumming

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David P. Lentini

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OCT 29 2004

Atty. Dkt. No. 072827-1801

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Thomas Stormann et al.
Title: G-PROTEIN FUSION
RECEPTORS AND
CONSTRUCTS ENCODING
SAME
Appl. No.: 09/679,664
Filing Date: 10/3/2000
Examiner: R. Landsman
Art Unit: 1647

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. <u>Kristen Cumming</u> (Printed Name) <u>Kristen Cumming</u> (Signature) <u>October 29, 2004</u> (Date of Deposit)
--

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.
- ☐ Assertion of Small Entity status is enclosed.
- ☒ The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	32	-	62	=	0	x	\$18.00	=	\$0.00
Independent Claims:	3	-	3	=	0	x	\$88.00	=	\$0.00

First presentation of any Multiple Dependent Claims: +	\$300.00	=	\$0.00
CLAIMS FEE TOTAL		=	\$0.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/> Extension for response filed within the first month:	\$110.00	\$0.00
<input type="checkbox"/> Extension for response filed within the second month:	\$430.00	\$0.00
<input checked="" type="checkbox"/> Extension for response filed within the third month:	\$980.00	\$980.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,530.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,080.00	\$0.00
EXTENSION FEE TOTAL:		\$980.00
<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$980.00
<input type="checkbox"/> Small Entity Fees Apply (subtract 1/2 of above):		\$0.00
TOTAL FEE:		\$980.00

☒ Please charge Deposit Account No. 50-0872 in the amount of \$980.00. A duplicate copy of this transmittal is enclosed.

☐ A check in the amount of \$980.00 is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such

extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date October 29, 2004

By 

FOLEY & LARDNER LLP
Customer Number: 33588
Telephone: (415) 438-6454
Facsimile: (415) 434-4507

David P. Lentini
Attorney for Applicant
Registration No. 33,944

COPY + duplicate

OCT 29 2004
Atty. Dkt. No. 072827-1801

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<i>Kristen Cumming</i>	
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First presentation of any Multiple Dependent Claims: +	\$300.00	=	\$0.00
CLAIMS FEE TOTAL =			\$0.00

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<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$980.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		\$980.00

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